FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

(a) Name of Individual. Organization or Corporation Mon Tana Family Foundation	n
(b) Address (number and street) check if different than previously reported P.O. Box 483	
(c) City, State and ZIP Coce 406-675-1. Lear 1 e	3. FEC Icentification Number
Is the liler a qualified nonprofit corporation?	No C
Individual filers only Name of Employer .	Occupation
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
July 15 Quarterly Report October 15 Quarterly Report	1
. January 31 Year-End Report . 48-Hour Report	•
b) is this Report an amendment? Yes No	
5. COVERING PERIOD: FROM 1/-3-/2	
THROUGH // - 4 - / 2	
6. TOTAL CONTRIBUTIONS	•
7. TOTAL INDEPENDENT EXPENDITURES 161. 79	.
der penalty of peritury it certify that the independent excenditures reported herein were not made in cooperation, o ggestion of, any candidate or authorized committee or agent of either, or any political party committee or its ag- rein wero made by a corporation) it certify that the corporation is a qualified nonprofit corporation under the Con	ent. In addition, (if the independent expenditures reported
PE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Jeff Laszloffy Joff	11-4-1
NOTE: Submission of laise, erroneous or incomplete information may subject the person signing the	als report to the pertaities of 2 U.S.C. §437g.

5PG021

FEC Schedule 5 (REV. 08/2005)

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